U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

For Official Use Only	
READ THE INSTRUCTIONS CAREFUL	LY BEFORE PREPARING THIS REPORT.
1. File Number U - 12776	2. Fiscal Year Covered From:
	////// Through: /2/31/04
3. Name and address of person filing.	4. Name, file number, and address of labor organization.
Name Ronald . I O'Keefe	Name Waws paper and Mail Deliverer's Union
	Labor Organization File Number
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any
Street 83 Connecticut ST.	Street 24-16 Queens Plaza South Room 306
City S. I.	City Z:I.C. In the Company of the City
State 10307	State 11-19 ZIP Code + 4 1/10/
5. Position in labor organization. President	
A. Held an interest in. engaged in transactions (including loans) with, or monetary value from an employer whose employees your organizate.  6. Name and address of Employer (including trade name, if any).  Name The New York Times Company  Trade Name, if any: New York Times  P.O. Box, Bldg., Room No., if any  Street QQQ West 4324 St.  City N.Y.  State N.V.  ZIP Code + 4 10036	Independent of the instructions):  In derived income or other economic benefit of tion represents or is actively seeking to represent.  7.a. Nature of Interest, Transaction, or Income.  Bus: ness meals from  1/13/a4. Through 12/a3/a4  7.b. Amount.  See a Hached schedule for amounts and dates.
The undersigned declares, under negative	on 8/8/05 7/8 948 9107
	Date Telephone Number

Name of Person Filing	File Number U-	
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.		
8. Name and address of Business (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg Room No., if any  Street  City  State  ZIP Code + 4	9. Business deals with:  a. Labor Organization  b. Trust  c. Employer	
10. If 9.b. or 9.c. is checked give trust or employer's name.  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  ZIP Code + 4	11. a. Nature of such dealing.  11. b. Approximate dollar value of such dealing.  12. a. Nature of interest held or income received.	
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.		
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State  ZIP Code + 4	14.a. Nature of payment.	
13.b. Is the Business an Employer . or Consultant . ?	14.b. Amount of payment.	

## Business Meals with the New York Times

<u>Date</u>	<u>Amount</u>
01-13-2004	\$102.00
02-05-2004	\$112.00
03-18-2004	\$103.00
05-25-2004	\$45.00
06-24-2004	\$94.00
07-07-2004	\$66.00
09-01-2004	\$75.00
09-13-2004	\$140.00
10-26-2004	\$103.00
12-23-2004	\$39.00